TO: FROM: THE CITY COUNCIL

THE CITY MANAGER'S OFFICE

COUNCIL MEETING DATE JUNE **20**, 1990

SUBJECT:

LODI AMBULANCE SERVICE

PREPARED BY:

City Manager

RECOMMENDED ACTION:

That the City Council review the requested amended rate schedule for ambulance service in the City of Lodi and take action as deemed appropriate.

BACKGROUND **INFORMATION**:

The City Code provides that the City Council "reserves the right to finally determine and fix by resolution, the rates to be charged by the operator of the ambulance service." Mr. Michael N. Nilssen,

owner-operator of Lodi Ambulance Service, has, in accordance with the provisions of the City Code, filed with the City a request to amend the ambulance rates charged in the City of Lodi. A copy of the requested new rate schedule is attached (Exhibit A). Also attached (Exhibit B) is a copy of an order of the County Board of Supervisors and an accompanying Board resolution establishing the County ceiling for ambulance rates. The request of Lodi Ambulance Service is in accordance with the new ceiling. The basic rate (Basic Life Support) for emergency calls would be increased by approximately 9%. The Advanced Life Support rate would also be increased by approximately 9%, as would the Night Call extra charge and Mileage charge. The rate for oxygen would increase 10%. Call extra charge and Mileage charge. The rate for oxygen would increase 10%. The new rate schedule would be effective July 1, 1990. The last increase was effective August 10, 1989. The County's plan is to review the ambulance rate schedule at mid-year of each year. Previous reviews were toward the end of each A copy of the appropriate City of Lodi resolution is also attached (Exhibit C).

Mr. Nilssen will be in attendance at Wednesday night's meeting to present this request and to answer any questions Councilmembers may have.

Respectfully submitted,

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Thomas A. Peterson

City Manager

TAP br

Attachments

COUNC836

LIFE MEDICAL INDUSTRIES, INC.



March 30, 1990

Mr. Thomas Peterson city Manager City of Lodi 221 W. Pine Street Lodi, CA 95240

Re: Fee Adjustment

Dear Mr. Peterson:

San Joaquin County has established a fee adjustment schedule to be effective June 1, 1990. A copy is attached for your review. Pursuant to Lodi City Ordinance 1347, Section 25, this letter provides the city with a 30-day notice of fee changes.

This schedule will provide a 4.18% increase in our revenue. While it is not keeping pace with the inflation experienced in our company (and the industry as a whole), we are continuing to explore all avenues of budget control and cost-effective management which will allow us to provide the community of Lodi with the high level of service they have come to expect from Life Medical Industries.

If you have any questions or comments, please feel free to contact Michael Nilssen or myself at your convenience,

Sincerely,

Jo Ann Hodge

Chief Financial Officer

JH: Jird

encl:

EXHIBIT B

Before the Board of Supervisors

County of San Joaquin, State of California

в- 90-835

MOTION: SIMAS / BARBER

ADJUSTMENT TO COUNTY AMBULANCE RATES PURSUANT TO AMBULANCE ORDINANCE #3245: ADJUSTMENT TO AMBULANCE PERMIT FEES

THIS BOARD OF SUPERVISORS DUES HEREBY adopt the resolution revising the maximum ambulance rates for the County of San Joaquin for emergency medical services effective June 1, 1990; and

IT IS FURTHER ORDERED that the Board adopt the resolution setting ambulance permit fees for the County of San Joaquin effective June 1, 1990; and

IT IS FURTHER ORDERED that the Director of Health Care Services be directed to evaluate in conjunction with the ambulance providers and city representatives the advisability of changing the ambulance rate structure to an all inclusive emergency charge system.

I HEREBY CERTIFY that the above order wes p a d and adopted on by the following vote of the Board of Supervisors, to wit:

AYES:

BARBER, COSTA, SOUSA, SIMAS, WILHOIT

NOES:

NONE

ABSENT: NONE

ABSTAIN:NONE

OTORETTA J. HAYDE

the Board of Supervisors

County of San Joaquin

State of California

1,5-1. A. B.

BEFGRE THE BOARD OF SUPERVISORS OF THE COUNTY OF SAN JOAQUIN STATE OF CALIFORNIA

: R-90- M41

RESOLUTION SETTING AMBULANCE RATES

-000-

Effective June 1, 1990

BE IT RESOLVED that the Board of Supervisors hereby sets the emergency ambulance rates under the Ordinance Code of San Joaquin county, Section 4-7909 as follows:

I. POLICIES

- A. Ambulance providers may charge rates equal to or below the rates listed in Section 11 & III below.
- B. The rate structure applies to county areas and to incorporated areas where the City Council has adopted the ordinance.
- C. Changes in rates must be posted with the EMS Agency at least 30 days prior to its implementation.
- D. The Base rates charged to patients will be consistent with the patient's treatment and in accordance with San Joaquin County's policies and procedures (eg. patients receiving BLS care are charged the BLS base rate. Patients receiving ALS care are charged an ALS base rate).

II. MAXIMUM RATES FOR BASIC LIFE SUPPORT SERVICES

Base Rate ● \$236.00

Night \$50.00

Oxygen \$33.00

Mileage \$9.00

includes emergency charge

III. MAXIMUM RATES FOR ADVANCED LIFZ SUPPORT SERVICES

Not to exceed \$420.00, not including the following maximum changes:

 Night Call
 \$50.00

 Oxygen
 \$33.00

 Mileage
 \$ 9.00

CHARGES ABOVE MAXIMUM RATES IV.

An ambulance provider may charge above the rates listed in Section II and III above after meeting the following conditions:

- The ambulance provider must present justification for its higher charges to the City Council within its service zone.
- Upon the City Council approval and the Board of Supervisors concurrence with the higher charges, the ambulance pro.-riders may set higher fees for its service areas.

PASSED AND ADOPTED this 22nd day of ______ May the following vote of the Board of Supervisors to wit:

AYES:

BARBER, COSTA, SOUSA, SIMAS, WILHOIT

NOES:

NONE

ABSENT: NONE

ATTEST: JORETTA J. HAYDE

Clerk of the Board of Supervisors

of the County of San Joaquin, State of California

Caroline Junco

Deputy Clerk

DOUGLASS W. WILHOIT DOUGLASS WILHOIT, CHAIRMAN Board of Supervisors

County of San Joaquin State of California

COB-Orig.; CAP-2 County Counsel, HCS-2

CITY COUNCIL

JOHNR (Randy) SNIDER. Mayor DAVID M. HINCHMAN Mayor Pro Tempore EVELYN M. OLSON JAMESW PINKERTON. Jr FRED M. REID

CITY OF LODI

CITY HALL, 221 WEST PINE STREET

CALL BOX 3006

LODI, CALIFORNIA 95241-1910

(209) 334-5634

TELECOPIER: (209) 333-6795

THOMAS A. PETERSON
City Manager
ALICE M. REIMCHE
City Clerk
BOB McNATT

City Attorney

June 26, 1990

Mr. Mike Nilssen Lodi Ambulance Service P.O. Box 892170 Stockton, CA 95269

Dear Mr. Nilssen:

Enclosed herewith please find a certified copy of Resolution No. 90-104 which was adopted by the Lodi City Council at its June 20, 1990 regular Council meeting which amended the rate schedule for ambulance service within the City of Lodi effective July 1, 1990.

If you have any questions regarding this matter, please phone our office.

Very truly yours

Alice M. Reimche

City Clerk

AMR/jmp

RESOLUTION NO. 90-104

A RESOLUTION OF THE LODI CITY COUNCIL APPROVING AMENDED FEE SCHEDULE FOR SERVICE PROVIDED BY LIFE MEDICAL INDUSTRIES, INC.

RESOLVED, that the City Council of the City of Lodi does hereby approve the amended fee schedule for service provided by Life Medical Industries, Inc., effective July 1, 1990, as shown on Exhibit 1, attached hereto and thereby made a part hereof.

Dated: June 20, 1990

I hereby certify that Resolution No. 90-104 was passed and adopted by the City Council of the City of Lodi in a regular meeting held June 20, 1990 by the following vote:

Ayes: Council Wembers - Hinchman, Olson, Pinkerton, Reid

and Snider (Mayor)

Noes: Council Members - None

Absent: Council Members - None

Jénnifer M. Perrin Deputy City Clerk

-Mindice

The Foregoing Document Is Certified To Be A Correct Copy Of The Original On File In This Office.

Jennifer M. Perrin Deputy City Clerk, City Of Lodi

Dated:

(0/25/9)